

California In-Hospital Breastfeeding as Indicated on the Newborn Screening Form Statewide, County and Hospital of Occurrence by Race/Ethnicity: 2000-2001

EXECUTIVE SUMMARY

Benefits of Breastfeeding

Overwhelming scientific research indicates that breastfeeding is the superior method of infant feeding and reaps great health and economic benefits. Significantly lower rates of diarrhea, ear infections, lower respiratory illness, and childhood lymphomas occur among breastfed infants and children in the United States. Breastfeeding has also been reported to protect against necrotizing enterocolitis, bacteremia, meningitis, botulism, sudden infant death syndrome, urinary tract infection, early childhood caries, juvenile diabetes, and inflammatory bowel disease. Developmentally, breastfed infants have better visual acuity, and evidence suggests that their cognitive development is superior. Looking only at ear infections, infants who are exclusively breastfed for at least four months had half the number of ear infections as formula-fed infants. For mothers, breastfeeding reduces the risk for developing premenopausal breast, ovarian, and endometrial cancer.

DHS' Efforts to Increase Breastfeeding Rates in California

Given these significant health benefits, the Department of Health Services (DHS) established a Breastfeeding Promotion Policy to ensure all DHS programs promote breastfeeding as the superior way to feed infants. In addition, the Department has a Strategic Plan for Breastfeeding Promotion that includes over fifty objectives. Providing hospitals with their own specific breastfeeding data is a key objective in the Department's Strategic Plan.

Breastfeeding Data Tables

The Maternal and Child Health Branch, with input from the California Breastfeeding Promotion Advisory Committee and the Women, Infants and Children Supplemental Nutrition Branch, developed the enclosed state, county and hospital-specific breastfeeding tables with data obtained from the California Newborn Screening Program database of the Genetic Disease Branch.

Data for each county and hospital are provided for the 2000-2001 time period. The county data are based on occurrence births and not resident births. The hospital data are grouped by county. Tables include the following information:

- 1) the number of infants by race/ethnicity with known feeding choice;
- 2) the percentage of infants exclusively breastfed; and,
- 3) the percentage of infants breastfed either exclusively or in combination with formula.

Please refer to the attached footnotes for more specific information or clarification of the methodology used to develop the tables.